# County of Los Angeles
# DEPARTMENT OF CHILDREN AND FAMILY SERVICES

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**DAVID SANDERS, PH.D.**
**Director**




September 22, 2003

To: Supervisor Yvonne Brathwaite Burke, Chair
Supervisor Don Knabe, Chair Pro Tem
Supervisor Gloria Molina
Supervisor Zev Yaroslavsky
Supervisor Michael D. Antonovich

From: David Sanders, Ph.D.
Director

**AUGUST 5, 2003 BOARD AGENDA ITEM #3: RISK MANAGEMENT TECHNIQUES**

On August 5, 2003, in response to a motion by Supervisor Molina, your Board ordered the Department of Children and Family Services to report back on four techniques to manage risk within the Department.

1. **DCFS is to report back on September 9th their efforts to create a more efficient case file with an efficient file retrieval system. Please consider the model used at MacLaren Children's Center (MCC) where they utilized a Plan of Care that included a child's family, medical, educational and placement history as well as how all needs would be met for every child. DCFS is to report on the feasibility of implementing the Plan of Care.**

   The Department has examined several options for producing a more efficient plan of care without increasing costs or reducing worker productivity as a result of the change. The Department recognizes that we must improve our record-keeping efficiency and effectiveness on an immediate basis.

   As a result of our review of this issue, it has become clear that the role and purpose of the case plan is what needs to change. The case plan must function as the strategic document guiding and controlling all activity on the case. The case plan must address the roles, responsibilities and actions of each of the parties to

the plan: the Department, the family and service providers. Making the case plan a more critical document in guiding the activities performed on cases will have a major impact on our success in realizing our outcome goals of improving safety and reducing the length of time to permanency.

Also during this review, we determined that the six-month intervals between the judicial reviews of progress on the case plans are too long. We will consult with County Counsel and the Presiding Judge of the Juvenile Court on the desire to have more frequent judicial reviews on cases to expedite achievement of plan goals.

We will also be working with the Juvenile Court and our staff to design a case plan format within the CWS/CMS case management system that will play a more functional role in guiding and measuring our progress toward plan goal achievement. We must also strengthen our monitoring of full compliance with the preparation and recording of the case plans in the new format in our CWS/CMS case management system. We will report back to the Board on our progress toward this case plan within 30 days.

2. **DCFS shall consider the implementation of a negative outcome reporting system, whereby DCFS social workers report any problem, within 24 hours, to DCFS Administration that might impact the safety of the child and create potential liability for the County. DCFS is to report on the feasibility of a system such as the DHS format and protocol.**

   The Department's Critical Incident and Child Fatality Review (CI/CFR) Section has established a detailed protocol for negative outcome reporting and will implement it, as follows:

   Within 24 hours, the CI/CFR Section is notified of all child fatalities that are called into the Child Protection Hotline (CPHL). These fatalities are not only on open cases, but also on closed cases where there has been departmental history. An alert and preliminary fact sheet is prepared and forwarded to the CI/CFR Section for review. Reviewing fatalities on closed cases where there has been departmental history allows for assessment of prior casework, as well as potential liability concerns for the County.

   Within 24 hours, the CI/CFR Section is also notified of critical incidents that are called into the CPHL. To ensure the Department captures all areas of concern, guidelines have been developed to define a critical incident. Taking a proactive role and reporting critical incidents gives the CI/CFR Section an opportunity to assess the circumstances of the incident and the family, and review for potential risk factors.

**The following five areas define a critical incident:**

A. Serious injuries (any injury that impedes any of the child's normal physical activities) which result in substantial medical problems and hospitalization or Emergency Room treatment, and are attributed to child abuse and/or neglect (fractures, burns, internal injuries, etc.), *AND there is an open case, open referral or there were prior DCFS services on a case or referral that is now closed.*

B. Serious incidents of extreme, extraordinary and bizarre emotional abuse by a caregiver, *AND there is an open case, referral or there were prior DCFS services on a case or referral that is now closed.*

C. Serious child exploitation, *AND there is an open case, open referral or there were prior DCFS services on a case or referral that is now closed.*

D. Suicide attempts (a child's deliberate self-inflicted injury) resulting in hospitalization or Emergency Room treatment in a medical facility, *AND there is an open case, open referral or there were prior DCFS services on a case or referral that is now closed.*

E. All kidnappings of children under Departmental supervision, including those children under a home of parent order (whether abducted by a parent, legal guardian, relative or non-related individual.) *This applies to children on an open case, open referral or where there were prior DCFS services on a case or referral that is now closed.*

Based on the Board's request, the CI/CFR Section has also established a three-day report on all fatalities to be prepared by the case-carrying Children's Social Worker and provided to the CI/CFR Section. The information is based on the social worker's knowledge of the case and circumstances related to the fatality. When liability issues arise, information will be conveyed to the Office of Litigation Management, which is administered by the Department's Risk Management Coordinator. The liability issues will be evaluated through the utilization of early analysis techniques, such as roundtables.

3. **Every Social Worker is required to enter each case into a computer database. DCFS shall conduct an audit of this mandate. Please, report on the feasibility of this proposed audit on September 9, with a proposed auditing tool and time frame of such an audit, in an effort to ensure that all children's records are properly entered into State–mandated computer systems.**

   The DCFS Quality Assurance Division has designed an audit tool to assess compliance with complete CWS/CMS information related to all critical case information. Audits will commence October 1, 2003 and be completed quarterly.

The results will be reported to the Board on a quarterly basis, beginning with the first report on or about January 2004. The Case Plan Audit instrument is attached (Attachment I).

Additionally, the Department is subscribing to a service from the Children's Research Center (CRC) on a 12-month basis. The CRC service, known as "Safe Measures," will support a case review capability to assess individual social worker utilization of CWS/CMS and completion of required tasks.

4. **Report on a quarterly basis to the Board, County Counsel, and the Risk Manager Inspector General any recurring risk management issues, such as inadequate documentation, in an effort to analyze and implement systemic changes to ensure the safety of children in every placement.**

   The Department will comply with implementation of the report with requested modification. The Department's Risk Management Coordinator will provide quarterly reports to the County Risk Manager Inspector General that will be specific to systematic issues that are extrapolated from claims and lawsuits filed against our Department, Child Fatality and Critical Incident investigations and investigations completed by Internal Affairs. It is respectfully recommended that the information be provided to the Board through County Counsel to maintain attorney-client privilege. These reports could be presented in closed session, as they are exceptions to the Public Records Act.

If you have any questions, please call me or your staff may call Helen Berberian, at (213) 351-5530.

DS:mv
Attachments

c: Chief Administrative Officer
Executive Officer, Board of Supervisors
County Counsel